

GNLU Indian Business and Commercial Laws Summer School 2016

Registration Form

Instructions:

Permanent Address:

- ✓ Print and fill the Application Form.
- ✓ Submit the scanned copy of Application Form to gibcla@gnlu.ac.in before last date of Application (refer brochure for that).
- ✓ Indian Applicants have to send the hard copy of the Application Form within 7 days from the last date of Application to the Coordinator of Summer School 2016.
- ✓ Foreign Applicant can send or submit Application Form on the date of arrival to the Coordinator of Summer School 2016. The envelope shall be sent super-scribing "GIBCLA Summer School 2016"
- ✓ Refer GIBCLA Summer School 2016 Brochure for the address of Coordinator, GIBCLA Summer School 2016
- ✓ Documents to be attached with Application Form. Refer Page no 6 of the Registration Form.

All information must be legibly printed in black ink or typed.

1) Student Information (Filled by Indian and Foreign Students) Name (as per the passport records): Last Name: _______ Middle Name: ______ First Name: ______ Sex: ______ Nationality: ______ Do you hold dual citizenship? ______ If yes, name of the Country 1) ______ 2) _____ Passport Number ______ Issue Date: ______ Expiry Date ______ Correspondence Address: ______ Zip Code: ______ Country: _______

City:	State:	Zip Code:	Country:	
Email Address:				
Alternate Email Addı	ress:			
Contact Number: 1. Work:		(with Country & A	Area Code)	
			Area Code)	
3. Mobile:				

2) Qualification

(Filled by Indian and Foreign Students)

Educational Qualifications Details (Starting from currently pursuing):

Particulars of the Degree	Name of the University	Year of Passing	Grade/ Division
(Filled only by Foreign Students)			
English Proficiency: Beginner/ Into	ermediate/ Advanced		
Academic Referee (Please give	details of the person whom w	ve may contact concerning you	ur application):
Name:		Occupation:	
Address:			
City: State	: Zip Code:	Country:	
Email Address:			
Alternate Email Address:			-

Contact Number: _____ Mobile Number: _____

3) Personal Information

(Filled by Indian and Foreign Students) Father's Name______ Occupation: _____ City: _____ State: ____ Zip Code: ____ Country: ____ Email Address: Alternate Email Address: Contact Number: _____ Mobile Number: _____ Mother's Name______ Occupation: ______ Address: City: _____ State: ____ Zip Code: ____ Country: ____ Email Address: _____ Alternate Email Address: Contact Number: Mobile Number: 4) Emergency Contact Details Information (Filled only by Foreign Students) Name of the person to contact in Emergency: Relation to the above named person: Address of the above mentioned Person: City: _____ State: ____ Zip Code: ____ Country: ____ Email Address: _____ Alternate Email Address: ______ Contact Number: _____ Mobile Number: _____

5) Registration Fee

(Filled by Indian and Foreign Students)

Registration Category: Foreign Student (USD)/ Student from SAARC (USD) / Indian Student (INR)
Registration Fee:	_ (USD/INR)		
Transaction No			

Mode of Payment:

• For Indian Students

Online Mode:

Please refer this link for Online Payment:

https://www.onlinesbi.com/prelogin/icollecthome.htm?corpID=627430

• For Foreign Students

Bank Details:

Name of beneficiary: Gujarat National Law University

Address of Beneficiary: Attalika Avenue, Knowledge, Corridor, Koba,

Gandhinagar, Gujarat, India-382028 Name of the Bank: HDFC Bank Ltd

Bank Branch (Full Address): G - 2, Ground Floor, Super Mall - II, Infocity, Gandhinagar - 382 009

Bank Account Number: 24971450000146 Beneficiary Bank's SWIFT Code: HDFCINBB

6) Declaration

(Filled by Indian and Foreign Students)

I certify that all the information provided in my application, supporting documentation and subsequent communications are complete and accurate to the best of my knowledge, and that all attached or separately submitted personal statements and responses represent my own work. I understand that I have a continuing obligation to update the information provided in this application. I accept that any misrepresentation or omission may invalidate any further consideration and may be cause for legal action or cancellation of participation.

			_
Applicant Signature		Date	
Applicant Name		Place	-
other online services u	nless you provide us that inforn	rmation about you when you visit our Websites ation voluntarily. Any personal information you e are legally required to do so in connection wit	provide will only
City:	State:		

Attachments: For Foreign students

- 1. Legible photocopy of the passport (first four and last four pages)
- 2. Copy of the certificates and testimonials
- 3. Curriculum Vitae
- 4. Medical clearance certificate (from medical practitioner)
- 5. Additional sheet for any additional information

Attachments: For Indian Students

- 1. Copy of the certificates and testimonials (can also be submitted on date of arrival)
- 2. Curriculum Vitae
- 3. Transaction Receipt of Course Fee Payment

7) Declaration by Sender Institute

(Filled only by Foreign Students)

Sender Institution needs to fill up the following details

This is to certify that Mr./Ms.	Student ID No
Son/Daughter of Mr./Ms	Student ID No is a bonafide student of
	College/University and he/she bears a good moral character. He/She(a three/four/five years) course.
(Name of the Academic Programme)	
Name (college/university):	
State and Country:	
Contact detail of the Coordinator	
Telephone:Mobile:	
Email ID:	
Website:	
Coordinator Signature	Date
Coordinator Name	Name of the College/University with seal